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## BIB DATA SHEET

CONFIRMATION NO. 7672

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/573,183	03/23/2006	128	3731	5657-102 US		
<b>APPLICANTS</b> Josep Duran Von Arx, Barcelona, SPAIN; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/ES04/00416 09/22/2004 <b>** FOREIGN APPLICATIONS *****</b> SPAIN P200302195 09/22/2003 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> SMALL ENTITY ** 10/04/2007						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/THOMAS MCEVOY/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance TM Initials	<b>STATE OR COUNTRY</b> SPAIN	<b>SHEETS DRAWINGS</b> 4	<b>TOTAL CLAIMS</b> 1	<b>INDEPENDENT CLAIMS</b> 1
<b>ADDRESS</b> MATHEWS, SHEPHERD, MCKAY, & BRUNEAU, P.A. 29 THANET ROAD, SUITE 201 PRINCETON, NJ 08540 UNITED STATES						
<b>TITLE</b> Nasal Stimulator						
<b>FILING FEE RECEIVED</b> 645	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		